Hospital Inpatient Quality Reporting (IQR) Program National Healthcare Safety Network (NHSN) Enrollment and Data Submission Checklist Influenza Vaccination Coverage Among Healthcare Personnel (HCP) Measure Data October 1, 2022–March 1, 2023 (FY 2025)			
Due	Steps	<b>✓</b>	
	STEP 1: Enroll in NHSN.		
At least 6 weeks prior to the data submission deadline 05/15/2023	a. Visit <a href="http://www.cdc.gov/nhsn/enrollment/index.html">http://www.cdc.gov/nhsn/enrollment/index.html</a> for enrollment information and <a href="https://www.cdc.gov/nhsn/pdfs/training/enroll/nhsn-facility-enrollment-training.pdf">https://www.cdc.gov/nhsn/enrollment/index.html</a> for enrollment information and <a href="https://www.cdc.gov/nhsn/enrollment/index.html">https://www.cdc.gov/nhsn/enrollment/index.html</a> for enrollment information and <a href="https://www.cdc.gov/nhsn/enrollment/index.html">https://www.cdc.gov/nhsn/enrollment/index.html</a> for enrollment information and <a href="https://www.cdc.gov/nhsn/enrollment/index.html">https://www.cdc.gov/nhsn/enrollment/index.html</a> for training and enrollment procedures.  2. Once enrolled, the NHSN Facility Administrator completes the NHSN setup process:		
	STEP 2: Report Data to NHSN		
On or before <b>05/15/2023</b>	Log in to Secure Access Management Services (SAMS) to access NHSN reporting at <a href="https://sams.cdc.gov.">https://sams.cdc.gov.</a> Enter SAMS username and password.		
	2. From the NHSN landing page, select the Healthcare Personnel Sa fety component and facility ID from the drop-down menu. Select Submit.		
	<ul> <li>3. Complete the HCP Influenza Vaccination Summary form: <ul> <li>a. From the left-hand navigation menu, select Vaccination Summary.</li> <li>b. Click Annual Vaccination Flu Summary. Then, click Add and Continue.</li> <li>c. Influenza Vaccination Summary Report for ACHs: <ul> <li>i. Ensure the Facility ID a ccurately reflects the CMS Certification Number (CCN) for the reported facility</li> <li>ii. Select the appropriate flu season in the drop-down box (e.g., 2022/2023).</li> <li>iii. Select Hospital for location.</li> </ul> </li> </ul></li></ul>		
	4. Complete HCP data entry: Note: Hospital counts should be entered on one single influenza vaccination summary data form. This includes all inpatient and outpatient units/departments of the acute care facility sharing the exact same (100% identical) CCN as the acute care facility, regardless of distance from the facility. This excludes all inpatient and outpatient units/departments of the acute care facility with a different CCN, even if different by only one letter or number from the acute care facility:  a. Enter data in all columns where asterisks indicate required data.  b. Use the Comments box to enter any additional information. Information in the Comments box will not be shared with CMS.  c. Click Save to save the record.  d. Complete the optional Seasonal Survey on Influenza Vaccination Programs for HCP, if desired.  5. Edit HCP Influenza Vaccination Summary data (if necessary):  a. Click Edit to modify existing data.  i. Each timea user enters data for the current influenza season, all previously entered data for that season will be overwritten.  ii. The Date Last Modified shows when the data were last entered and saved.  b. Click Save to sa ve the updated data.  A messa ge confirming data were saved should appear at the top of the screen.		

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Due	Steps	<b>√</b>
	STEP 3: Perform Data Verification	
On or before <b>05/15/2023</b>	1. Verify that the data have been saved correctly by running a Line Listing – HCP Flu Vaccination Data for CMS IPPS and OPPS Report using the instructions below:	
	STEP 4: Run the Provider Participation Report in the Hospital Quality Reporting (HQR) Secure Portal	
On or before <b>05/15/2023</b>	<ol> <li>Log in to the HQR Secure Portal.</li> <li>The HQR Secure Portal launch page will open.</li> <li>From the Dashboard, on the left-hand side of the screen select Program Reporting.</li> <li>Under Program Reporting click on Reporting Requirements.</li> <li>On the Reporting Requirements page select IQR in the Program dropdown and the applicable quarter in the Period dropdown. Then click on Export CSV.</li> </ol>	
	STEP 5: Perform ACH CCN and CCN Effective Date Verification in NHSN	
On or before <b>05/15/2023</b>	<ol> <li>Verify:         <ul> <li>a. The facility is enrolled as the proper facility type in NHSN.</li> <li>b. The correct facility CCN <u>and</u> CCN effective date have been entered in to NHSN.</li> <li>i. Your facility's CCN effective date is the date of receipt of the CCN from CMS. If the CCN is incorrect, CMS will <b>not</b> receive the data submitted to NHSN.</li> </ul> </li> <li><b>NOTE:</b> Upon completing verification, it is recommended that you retain screenshots or printouts for your records.</li> </ol>	

## Notes

- While navigating through NHSN, use the NHSN buttons and not the web browser buttons.
- Data submitted correctly in NHSN will be automatically transmitted from CDC to CMS; no action is required on the part of a reporting facility following completion of the steps above.
- Educational Webinars: Educational webinar materials pertaining to the HCP influenza vaccination measure are available on the CDC website at <a href="https://www.cdc.gov/nhsn/acute-care-hospital/hcp-vaccination/index.html">www.cdc.gov/nhsn/acute-care-hospital/hcp-vaccination/index.html</a>.
- NHSN Help Desk: For questions a bout NHSN enrollment, HCP influenza vaccination data submission, or the data verification process, contact <a href="NHSN@cdc.gov">NHSN@cdc.gov</a>. We recommend including the ACH name and ACH-specific CCN, as well as ACH NHSN Enrollment, ACH HCP Data Submission, or ACH HCP Data Verification in the email subject line, as a ppropriate.
- SAMS Help Desk: For assistance with SAMS, contact the help desk toll-free at (877) 681-2901 or via email at samshelp@cdc.gov

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